



REQUEST FOR F-1 TRANSFER INFORMATION

PART 1: To be completed by the student:

This is to inform you that I intend to transfer to ESSEX COUNTY COLLEGE (SEVIS School Code NEW214F00626000) for the FALL/SPRING 20\_\_ semester. Please complete the information requested below and return to the letterhead address as soon as possible.

Thank You.

Student Name: \_\_\_\_\_
Last/family First Middle

Signature: \_\_\_\_\_ Today's date: \_\_/\_\_/\_\_

PART 2: To be completed by the Designated School Official

- The student is in lawful F-1 status according to USCIS regulations, {8CFR 214.2(f) (6) (iii)} The student is/was last enrolled in the \_\_\_\_\_ semester.

SEVIS # N \_ \_ \_ \_ \_

- The student is not in lawful F-1 status according to USCIS regulations for the following reason:

\_\_\_\_\_

I am enclosing any information I have available that would be helpful in a reinstatement application.

The student has been authorized the following Practical Training benefits:

PRE-COMPLETION OPT: Full-time: \_\_months\_\_days Part-time: \_\_months \_\_days

POST\_COMPLETION OPT: Full-time: \_\_months\_\_days Part-time: \_\_months \_\_days

CURRICULAR: Full-time: \_\_months\_\_days Part-time: \_\_months \_\_days

Signature of DSO: \_\_\_\_\_ Title: \_\_\_\_\_

Name Printed: \_\_\_\_\_

School name and address: \_\_\_\_\_